Filed 01/14/21 Entered 01/14/21 16:17:31 Case 20-14775-pmm Doc 17 Desc Main

<u> </u>	, 14770 bill	III DOC 17	Doc	ument Page 1 of 22		.01 2	CSO Main
Fill in this i	nformation to ide	entify your case	and th	is filing:			
Debtor 1	David J. Fass First Name	bender Middle	Name	Last Name			
Debtor 2	F: (N						
	First Name	Middle		Last Name			
Jnited States Bankr	uptcy Court for th	e: EASTERN	DISTRI	CT OF PENNSYLVANIA, READING DIVIS	SION		
Case number 20-	14775						Check if this is a amended filing
ink it fits best. Be as formation. If more sp	A/B: Pro	cribe items. List a	. If two r	only once. If an asset fits in more than one on narried people are filing together, both are e is form. On the top of any additional pages,	qually responsible	e for supply	ying correct
	ch Residence, Buil			Estate You Own or Have an Interest In			
□ No. Go to Part 2.	oun, regul er equi		.,				
Yes. Where is the	. 0						
— rec. Whole is all	о ргорону .						
.1			What	is the property? Check all that apply			
38-1 Cranbe	rrv Rda			Single-family home			s or exemptions. Put laims on Schedule D:
	vailable, or other descri	iption		Duplex or multi-unit building Condominium or cooperative			Secured by Property.
Reading	PA	19606-3927		Manufactured or mobile home Land	Current value of entire property?		Current value of the portion you own?
City	State	ZIP Code		Investment property	\$148,69	1.00	\$148,691.0
			Who	Timeshare Other has an interest in the property? Check one		nple, tenan	r ownership interest cy by the entireties, o
				Debtor 1 only	Fee Simple		
Berks				Debtor 2 only			
County				Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if thi		unity property
			Other	information you wish to add about this iten erty identification number:	(113)	
2. Add the dollar v	alue of the porti	ion you own for	all of y	our entries from Part 1, including any e	ntries for pages		\$1/8 601 00

you have attached for Part 1. Write that number here......>>

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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Debtor 1	Fassbender,	David J.		Case number (if known)	20-14775
3. Cars. v	/ans. trucks. tracto	ors, sport utility vel	hicles, motorcycles		
		, , ,	,		
□ No					
Yes					
				Do not doduct on	nured eleime or everentions. Dut
3.1 Ma	ake: Volvo		Who has an interest in the property? Check one		cured claims or exemptions. Put v secured claims on Schedule D:
Мс		ription AWD	Debtor 1 only	Creditors Who Ha	ave Claims Secured by Property.
Ye			Debtor 2 only	Current value of	
•	proximate mileage:	81000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
Oti	her information:		At least one of the debtors and another		
			☐ Check if this is community property	\$10,438	8.00 \$10,438.00
			(see instructions)		<u> </u>
■ No □ Yes	es. Doals, Italiers, I	notors, personal wate	ercraft, fishing vessels, snowmobiles, motorcycle	accessories	
			n for all of your entries from Part 2, including		\$10,438.00
		nal and Household Ite			
Do you o	own or have any le	gal or equitable into	erest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Exam _l □ No	hold goods and fuples: Major appliances. Describe	ırnishings es, furniture, linens, d	china, kitchenware		
		Kitchen furnish	ings		
		1 table 2 chairs			
		1 microwave			
		1 refrigerator			
		1 dishwasher			
		1 washing macl	hine		
		1 dryer 1 stove			\$345.00
		Miscellaneous	furnishings		
		1 iron			
		1 bicycle			\$60.00
		Living Room fu	ırnishings:		
		1 couch	ŭ		
		1 desk			
		2 lamps			\$350.00
		Dining room Fu	ırnishings:		
		1 table			

Official Form 106A/B Schedule A/B: Property page 2

\$100.00

4 chairs

Case 20-14775-pmm Doc 17 Filed 01/14/21 Entered 01/14/21 16:17:31 Desc Main Page 3 of 22 Document Case number (if known) Debtor 1 Fassbender, David J. **Bedroom furnishings:** 2 beds 2 dressers 1 mirror \$195.00 2 lamps Tools \$20.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No ■ Yes. Describe..... 1 computer \$300.00 1 television 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... Usual items not worth \$300 aggregate in value of \$4,000.00. \$4,000.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information.....

Part 4: Describe Your Financial Assets

Part 3. Write that number here

Official Form 106A/B Schedule A/B: Property page 3

\$5,370.00

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for

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De	ebtor 1	Fassbender,	David			Case numb	oer (if known)	20-14775
Do	you ow	n or have any le	gal or e	quitable interest in any o	of the following?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No			ur wallet, in your home, in a	·	and on hand when you file yo	ur petition	
	□ res							
		-	-	other financial accounts; cve multiple accounts with	•	sit; shares in credit unions, br n, list each.	okerage houses	s, and other similar
	Yes				Institution name	:		
			17.1.	Checking Account	Wells Fargo			\$5,716.93
			17.2.	Checking Account	Wells Fargo (Custodial Account endi	ing in	\$5.80
			17.3.	Checking Account	Wells Fargo (Custodial Acciount end	ing in	\$3.08
	Examp ■ No	mutual funds, o oles: Bond funds, i		y traded stocks nt accounts with brokerage Institution or issuer name	-	ket accounts		
19.	Non-pu joint vo		ck and i	nterests in incorporated	and unincorpora	ated businesses, including	an interest in a	an LLC, partnership, and
	■ No							
	⊔ Yes.	Give specific info		about them me of entity:		% of owner	ership:	
20.	Negotia	able instruments i	nclude p	ds and other negotiable ersonal checks, cashiers' on the cashiers' chose you cannot transfer to	checks, promissory	notes, and money orders.		
		Give specific infor	_	bout them uer name:				
		n ent or pension a bles: Interests in IF			, thrift savings acc	ounts, or other pension or pr	ofit-sharing pla	ns
	■ Yes. I	List each account	Туре	ely. of account: k) or Similar Plan	Institution name	: tirment Account		\$9,897.85
	Your sh Examp		deposits	you have made so that you		rvice or use from a company is, water), telecommunications	s companies, o	r others
	■ No □ Yes				Institution name	or individual:		
			a period	ic payment of money to you	u, either for life or f	or a number of years)		
	■ No	loc	uar nom	e and description.				
	☐ Yes			·				
		s in an educatio C. §§ 530(b)(1), 5			d ABLE program,	or under a qualified state t	tuition prograr	n.
	- NO							

Official Form 106A/B Schedule A/B: Property page 4

Filed 01/14/21 Entered 01/14/21 16:17:31 Case 20-14775-pmm Doc 17 Desc Main Page 5 of 22 Document Debtor 1 Case number (if known) 20-14775 Fassbender, David J. Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list

Official Form 106A/B Schedule A/B: Property page 5

☐ Yes. Give specific information..

■ No

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Debto	Fassbender, David J.	ent Page 0 01 2	Case number (if known)	20-14775
	Add the dollar value of all of your entries from Part 4, include Part 4. Write that number here		s you have attached for	\$15,623.66
Part 5	: Describe Any Business-Related Property You Own or Have an I	nterest In. List any real esta	te in Part 1.	
	you own or have any legal or equitable interest in any business-re	elated property?		
I	No. Go to Part 6.			
	es. Go to line 38.			
Part 6	Describe Any Farm- and Commercial Fishing-Related Property If you own or have an interest in farmland, list it in Part 1.	You Own or Have an Interes	t In.	
46. D o	you own or have any legal or equitable interest in any far	m- or commercial fishing	-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That	You Did Not List Above		
<i>E</i>	byou have other property of any kind you did not already I examples: Season tickets, country club membership No Yes. Give specific information	ist?		
54. <i>I</i>	Add the dollar value of all of your entries from Part 7. Write	that number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55. I	Part 1: Total real estate, line 2			\$148,691.00
56. I	Part 2: Total vehicles, line 5	\$10,438.00		
57. I	Part 3: Total personal and household items, line 15	\$5,370.00		
58. I	Part 4: Total financial assets, line 36	\$15,623.66		
59. I	Part 5: Total business-related property, line 45	\$0.00		
60. I	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. I	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$31,431.66	Copy personal property to	stal \$31,431.66
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$180,122.66

Official Form 106A/B Schedule A/B: Property page 6

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		'	Document	<u> </u>	Page 7 of 22	_
	Fill in t	his information to identify	y your case:			
De	btor 1	David J. Fassben				
Do	btor 2	First Name	Middle Name	L	ast Name	
-	ouse if, filing)	First Name	Middle Name	L	ast Name	
Un	ited States E	Bankruptcy Court for the:	EASTERN DISTRICT OF P	ENNS	YLVANIA, READING DIVISION	
Ca	se number	20-14775				
	nown)					☐ Check if this is an amended filing
Of	fficial F	orm 106C				
S	chedu	le C: The Pro	operty You Cla	aim	as Exempt	4/19
prop out kno	perty you liste and attach to wn).	ed on <i>Schedule A/B: Prope</i> o this page as many copies	erty(Official Form 106A/B) as y of <i>Part 2: Additional Page</i> as n	our sou ecessa	irce, list the property that you claim a	oplying correct information. Using the s exempt. If more space is needed, fill s, write your name and case number (if
spe app fun- to a	ecific dollar a blicable statu ds—may be a particular o	amount as exempt. Alterr utory limit. Some exempt unlimited in dollar amou	natively, you may claim the f ions—such as those for hea int. However, if you claim an	ull fair Ith aid exem	market value of the property bein s, rights to receive certain benefits	ng exempted up to the amount of any s, and tax-exempt retirement under a law that limits the exemption
Pa	rt 1: Iden	tify the Property You Cla	im as Exempt			
1.	Which set	of exemptions are you cl	aiming? Check one only, ever	n if you	r spouse is filing with you.	
	_	•	nonbankruptcy exemptions. 11	•	, ,	
	_	claiming federal exemptions	. , .			
_			- , , , ,		III to the totament on below	
2.			ule A/B that you claim as exe	• •		O colfin to a distribution of the
		ption of the property and line /B that lists this property	e on Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Kitchen f	urnishings	\$345.00		\$345.00	11 USC § 522(d)(3)
	1 table 2 chairs 1 microw 1 refriger 1 dishwa	ator sher			100% of fair market value, up to any applicable statutory limit	
	1 dryer 1 stove	g machine Schedule A/B: 6.1				
	LINE HOIRS	onedule A/D. U. I				
	Miscellan	neous furnishings	\$60.00		\$60.00	11 USC § 522(d)(3)
	1 iron				100% of fair market value, up to	
	1 bicycle Line from S	Schedule A/B: 6.2			any applicable statutory limit	
	Living Ro	oom furnishings:	\$350.00		\$350.00	11 USC § 522(d)(3)

1 couch

2 lamps

1 desk

\$350.00

\$350.00

100% of fair market value, up to

any applicable statutory limit

Line from Schedule A/B. 6.3

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Fassbender, David J.			Case number (if known)	20-14775
rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Dining room Furnishings:	\$100.00		\$200.00	11 USC § 522(d)(3)
table chairs ine from Schedule A/B: 6.4			100% of fair market value, up to any applicable statutory limit	
Sedroom furnishings:	\$195.00	•	\$195.00	11 USC § 522(d)(3)
beds dressers mirror lamps ine from Schedule A/B: 6.5			100% of fair market value, up to any applicable statutory limit	
ools	\$20.00		\$20.00	11 USC § 522(d)(3)
ine from <i>Schedule A/B</i> : 6.6			100% of fair market value, up to any applicable statutory limit	
computer television	\$300.00	•	\$300.00	11 USC § 522(d)(3)
ine from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Vells Fargo ine from Schedule A/B 17.1	\$5,716.93	•	\$5,716.93	11 USC § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Vells Fargo Custodial Account ending in 8004	\$5.80	•	\$5.80	11 USC § 522(d)(5)
ine from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
Vells Fargo Custodial Acciount anding in 3354	\$3.08	•	\$3.08	11 USC § 522(d)(5)
ine from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
Reladyne Retirment Account ine from Schedule A/B 21.1	\$9,897.85		\$9,897.85	11 USC § 522(d)(12)
			100% of fair market value, up to any applicable statutory limit	

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0030 20 1-	ri i o piiiiii	Document Page 9	of 22	10.17.01	oc iviaiii
Fill in this inforr	nation to ident				
Debtor 1 Day	rid J. Fassbe	ender			
First		Middle Name Last Name		` }	
Debtor 2				.	
(Spouse if, filing) First I	Name	Middle Name Last Name			
United States Bankruptc	Court for the:	EASTERN DISTRICT OF PENNSYLVANIA, F	READING DIVISION		
Case number 20-147	75				
(if known)					if this is an led filing
				ameno	ieu illing
Official Form 106	<u>D</u>				
Schedule D: C	reditors	Who Have Claims Secured	by Propert	У	12/15
□ No. Check this bo ■ Yes. Fill in all of th Part 1: List All Secur	e information be	s form to the court with your other schedules. You lelow.	J	•	
		nore than one secured claim, list the creditor separately	Column A	Column B	Column C
		a particular claim, list the other creditors in Part 2. As all order according to the creditor 's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	·		value of collateral.	claim	if any
2.1 Quicken Loans, Creditor's Name	inc.	Describe the property that secures the claim:	\$130,453.00	\$148,691.00	\$0.00
Oreditor 3 Name		38-1 Cranberry Rdg, Reading, PA 19606-3927			
4050 W		As of the date you file, the claim is: Check all that			
1050 Woodward Detroit, MI 4822		apply.			
Number, Street, City, Sta		☐ Contingent ☐ Unliquidated			
rumber, offeet, Oity, ota	ie a zip code	☐ Disputed			
Who owes the debt? Che	ck one.	Nature of lien. Check all that apply.			
■ Debtor 1 only		An agreement you made (such as mortgage or sec	ured		
Debtor 2 only		car loan)			
Debtor 1 and Debtor 2 o	nly	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debto	rs and another	☐ Judgment lien from a lawsuit			

Mortgage

2865

Other (including a right to offset)

Last 4 digits of account number

 \square Check if this claim relates to a

Date debt was incurred 07/31/2018

community debt

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Deb	tor 1 David J. Fassbender	Case number (f known)			
	First Name Middle N	lame Last Name			
2.2	Santander Consumer USA	Describe the property that secures the claim:	\$19,100.00	\$10,438.00	\$8,662.00
	Creditor's Name	2016 Volvo S60 Inscription AWD			
Who	PO Box 961245 Fort Worth, TX 76161-0244 Number, Street, City, State & Zip Code	As of the date you file, the claim is: Check all the apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.	nat		
	Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage car loan)	or secured		
	Debtor 1 and Debtor 2 only It least one of the debtors and another Check if this claim relates to a	☐ Statutory lien (such as tax lien, mechanic's lie ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) ☐ Car Lo	,		
•	debt was incurred 03/17/2020	— Other (moduling a right to onset)	000		
		-			
If thi	the dollar value of your entries in Co s is the last page of your form, add the that number here:	lumn A on this page. Write that number here: ne dollar value totals from all pages.	\$149,553.0 \$149,553.0		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Document Pag	je 11 of 2	<u> 22 </u>		
Fill	in this information to identify your	case:				
Debtor	David J. Fassbend	ler				
	First Name	Middle Name Last N	lame			
Debtor (Spouse		Middle Name Last N	lame			
United	States Bankruptcy Court for the:	EASTERN DISTRICT OF PENNSYLV	ANIA, READ	ING DIVISION		
Case r	number 20-14775					
(if known	n)				_	if this is an ed filing
					aoa	
	ial Form 106E/F					
<u>3che</u>	edule E/F: Creditors Wi	no Have Unsecured Clai	ms			12/15
Part 1:						
	any creditors have priority unsecured	claims against you?				
	No. Go to Part 2.					
	Yes.					
ide: pos	ntify what type of claim it is. If a claim has	If a creditor has more than one priority unse both priority and nonpriority amounts, list the according to the creditor's name. If you have claim, list the other creditors in Part 3.	at claim here a	nd show both priority ar	nd nonpriority amounts	s. As much as
(Fo	or an explanation of each type of claim, se	e the instructions for this form in the instructi	on booklet.)			
				Total claim	Priority amount	Nonpriority amount
2.1	Internal Revenue Service	Last 4 digits of account numb	er	\$8,184.00	\$8,184.00	\$0
	Priority Creditor's Name Department of Treasury	When was the debt incurred?	2018			
	PO Box 7346					
	Philadelphia, PA 19101-7346		im in Chaale	all that apply		
w	Number Street City State Zip Code /ho incurred the debt? Check one.	As of the date you file, the cla	im is: Check a	ын тат арріу		
	Debtor 1 only	☐ Unliquidated				
_	Debtor 2 only	☐ Disputed				
_	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured	claim:			
_	At least one of the debtors and another	☐ Domestic support obligation				
_	Check if this claim is for a communi	ty debt Taxes and certain other deb	ts you owe the	government		
	the claim subject to offset?	☐ Claims for death or persona	,	•		

Income Tax - 2018

■ No

☐ Yes

 \square Other. Specify

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Or 1 Fassbender, David J.

Case number (f known) 20-14775

Deb	Fassbender, David J.		Case no	ufficer (if known)	20-14//5	
2.2	Pennsylvania Department of Revenue Priority Creditor's Name	Last 4 digits of account number When was the debt incurred?	9796 2018	\$1,737.00	\$1,737.0	\$0.00
	PO Box 280946 Harrisburg, PA 17128-0946	when was the dept incurred:	2010			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all	I that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	☐ Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	\square At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts y	ou owe the g	government		
	Is the claim subject to offset?	Claims for death or personal injury	ury while you	were intoxicated		
	■ No	Other. Specify				
	Yes	2018 State	Tax			
4.	■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each clathan one creditor holds a particular claim, list the other 2.	laim. For each claim listed, identify wh	at type of cla	im it is. Do not list clai	ms already include	d in Part 1. If more
	_				T	otal claim
4.1	American Express	Last 4 digits of account numb	er			\$6,745.00
	Nonpriority Creditor's Name	When was the debt incurred?	03/01	1/2019		
	PO Box 981537 EI Paso, TX 79998-1537 Number Street City State Zip Code	As of the date you file, the cla				
	Who incurred the debt? Check one.	7.0 0. 1.10 11.10 701 11.0, 11.0 0.1	101 0110011	t all that apply		
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsect	ıred claim:			
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a s	eparation ag	reement or divorce tha	at you did not	
	Is the claim subject to offset?	report as priority claims	~9		•	
	■ No	Debts to pension or profit-sha		and other similar debts	;	
	☐ Yes	Other. Specify Credit C	ard			

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Fassbender, David J.	Case number (it known) <u>20-14//5</u>	
Ardent Credit Union	Last 4 digits of account number	\$11,033.44
Nonpriority Creditor's Name	When was the debt incurred?	
1500 Spring Garden St Ste 500 Philadelphia, PA 19130-4070		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Ardent Credit Union	Last 4 digits of account number 0150	\$13,536.00
Nonpriority Creditor's Name	When was the debt incurred? 03/01/2020	
1500 Spring Garden St Ste 500 Philadelphia, PA 19130-4070	when was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Unsecured Loan	
Ardent Credit Union	Last 4 digits of account number 0154	\$20,011.00
Nonpriority Creditor's Name	When was the debt incurred? 04/26/2017	
1500 Spring Garden St Ste 500 Philadelphia, PA 19130-4070	<u> </u>	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Repossession Deficiency	

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Debto	Fassbender, David J.	Case number (f known) 20-14775	
4.5	Ardent Credit Union	Last 4 digits of account number 780L	\$9,533.00
	Nonpriority Creditor's Name	When was the debt incurred? 11/20/2015	
	1500 Spring Garden St Ste 500 Philadelphia, PA 19130-4070 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Loan - Charged Off	
4.6	Enerbank USA	Last 4 digits of account number 7267	\$2,034.00
	Nonpriority Creditor's Name	When was the debt incurred? 02/01/2020	
	1245 E Brickyard Rd Ste 600 Salt Lake City, UT 84106-2562	When was the dept incurred:	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	ls the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Unsecured Loan	
4.7	JPMCB - Card Services	Last 4 digits of account number	\$10,442.00
	Nonpriority Creditor's Name		Ψ10,442.00
	301 N Walnut St FI 9	When was the debt incurred? 08/01/2020	
	Wilmington, DE 19801-3971 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	• ,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	■ Other. Specify Credit Card	

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Debtor	Fassbend	der, David J.		Case nu	umber (if known)	20-14775	
4.8	TD Bank US	SA/ Target Credit	Last 4 digits of account number	1855			\$0.00
	Nonpriority Cred	altor's Name	When was the debt incurred?	04/01	/2019		
-	7000 Targe	t Pkwy N s, MN 55445-4301 City State Zip Code	A - of the aleternor file the elei-				
		the debt? Check one.	As of the date you file, the claim	i is: Check	ан тпат арріу		
	■ Debtor 1 onl	ly	☐ Contingent				
	Debtor 2 onl	ly	☐ Unliquidated				
	Debtor 1 and		☐ Disputed				
		of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
	☐ Check if thi	is claim is for a community	☐ Student loans				
	debt		☐ Obligations arising out of a sep	paration agr	reement or divorce	that you did not	
	_	bject to offset?	report as priority claims				
	■ No		Debts to pension or profit-share	ing plans, a	and other similar de	ebts	
	Yes		Other. Specify				
4.9		Discount Furniture	Last 4 digits of account number				\$2,650.00
	Nonpriority Cred	ditor's Name	When was the debt incurred?	11/01	/2020		
	PO Box 145	517	when was the dept incurred?	1 1/0 1	12020		
	Des Moines	s, IA 50306-3517					
		City State Zip Code the debt? Check one.	As of the date you file, the claim	n is: Check	all that apply		
	Debtor 1 onl		Пол				
	Debtor 2 onl	•	☐ Contingent				
	Debtor 1 and		☐ Unliquidated☐ Disputed☐				
		of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
		is claim is for a community	☐ Student loans				
	debt	·	☐ Obligations arising out of a sep	paration agr	reement or divorce	that you did not	
	_	bject to offset?	report as priority claims				
	■ No		☐ Debts to pension or profit-shar		and other similar de	ebts	
	☐ Yes		Other. Specify Credit Car	rd			
Part 3:	List Others	s to Be Notified About a Debt	That You Already Listed				
is tryir have n	ng to collect fro nore than one c	om you for a debt you owe to some	out your bankruptcy, for a debt that eone else, list the original creditor in ou listed in Parts 1 or 2, list the add submit this page.	n Parts 1 o	or 2, then list the o	collection agency	here. Similarly, if you
	nd Address n & Allard, l		n which entry in Part 1 or Part 2 did yo ne 4.2 of (<i>Check one</i>):			rity Unsecured Clair	
	gency Plz	r.C.				priority Unsecured (
	Mills, PA 193		ast 4 digits of account number	— Pail 2. (Steations with North	priority orisecured (Sidiffs
D 4	A 1.1.1. A						
Part 4:		mounts for Each Type of Unse				0110000450	
	ne amounts of f unsecured cla		s. This information is for statistical	reporting		•	the amounts for each
	6a.	Domestic support obligations		6a.	\$	I Claim 0.00	
Total cla		Taxes and certain other debts y	ou owe the government	6b.	\$	9,921.00	
	6c.	Claims for death or personal in	ury while you were intoxicated	6c.	\$	0.00	•
	6d.	Other. Add all other priority unsec	cured claims. Write that amount here.	6d.	\$	0.00	· -
							\neg
	6e.	Total Priority. Add lines 6a through	gh 6d.	6e.	\$	9,921.00	<u>-</u>
					Tota	l Claim	

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Debtor 1 Fas	ssbend	der, David J.	Case n	umber (if known)	20-14775	
	6f.	Student loans	6f.	\$	0.00	
Total claims from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$	0.00	
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	75,984.44	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	75,984.44	

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Fill in th	is information to identi	fy your case:	
Debtor 1	David J. Fassber	nder	
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F PENNSYLVANIA, READING DIVIS
_	20-14775		
(if known)			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company with	whom you have the , Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1			,,,		
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2	Name				<u> </u>
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4	Name				<u> </u>
	Number	Street			_
	City		State	ZIP Code	-
2.5	Name				_
	1101110				
	Number	Street			_
	City		State	ZIP Code	_

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		Docume	ni raye 100	1 22	
Fill i	n this information to identif	y your case:			
Debtor 1	David J. Fassber	oder			
Dobtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	s Bankruptcy Court for the:	EASTERN DISTRICT O	F PENNSYLVANIA, REA	ADING DIVISION	
Case numbe	r 20-14775				☐ Check if this is an
	Form 106H				amended filing
Schedu	ile H: Your Cod	ebtors			12/15
California No. G Yes. D	a, Idaho, Louisiana, Nevada, o to line 3. Did your spouse, former spous nn 1, list all of your codebto gain as a codebtor only if the	New Mexico, Puerto Rico se, or legal equivalent live wors. Do not include your sat person is a guarantor	ith you at the time? spouse as a codebtor if or cosigner. Make sure	d Wisconsin.) your spouse is filing you have listed the cr	states and territories include Arizona, with you. List the person shown in reditor on Schedule D (Official Form le E/F, or Schedule G to fill out
	olumn 1: Your codebtor me, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt
				_	
3.1	ime			_ ☐ Schedule D, line ☐ Schedule E/F, I	
				☐ Schedule G, lin	
					<u> </u>
Cit	mber Street y	State	ZIP Code		
				_	
3.2 Na	ime			Schedule D, line	
140	-			☐ Schedule E/F, I☐ Schedule G, lin	
Nu Cit	mber Street	State	ZIP Code		

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Fill	in this information to identify your ca	se.							
	otor 1 David J. Fas								
_	otor 2 ouse, if filing)								
Uni	ted States Bankruptcy Court for the:	EASTERN DISTRICT READING DIVISION	OF PENNSYLVANIA,						
Ca	se number 20-14775				Chec	k if this is:			
(If kı	nown)		•		ПА	n amende	d filing		
_	(()						ent showing post of the following d		hapter 13
<u>U</u>	fficial Form 106I				M	IM / DD/ Y	YYY		
S	chedule I: Your Inco	me							12/15
spo atta	plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. O Describe Employment	spouse is not filing wit	h you, do not include	information	about y	our spou	se. If more spa	ce is nee	eded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing s	pouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed			☐ Emple	•		
	information about additional employers.		☐ Not employed			☐ Not e	mployed		
	, ,	Occupation							
	Include part-time, seasonal, or self-employed work.	Employer's name	Automotive Serv Reladyne, LLC	ices					
	Occupation may include student or homemaker, if it applies.	Employer's address	910 Mountain Ho Sinking Spring, F		9373				
		How long employed th	nere?						
Pai	rt 2: Give Details About Mont	thly Income							
	mate monthly income as of the dat ss you are separated.	e you file this form. If y	ou have nothing to repor	t for any line	, write \$0	in the spa	ace. Include your	non-filing	g spouse
	u or your non-filing spouse have more ce, attach a separate sheet to this forn		oine the information for a	all employers	for that p	person on	the lines below.	If you nee	ed more
					For Deb	otor 1	For Debtor 2 non-filing sp		
2.	List monthly gross wages, salary deductions). If not paid monthly, ca	,	, ,	2. \$	7,	774.71	\$	N/A	
3.	Estimate and list monthly overting	ne pay.		3. +\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add line	e 2 + line 3.		4. \$	7,77	4.71	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

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Debte	or 1	Fassbender, David J.	_	Case	e number (if known)	20-14775		
				Fo	r Debtor 1	For Debtor	2 or	
				го	i Debtoi i	non-filing s		
	Сор	y line 4 here	4.	\$	7,774.71	\$	N/A	
	•	, , , , , , , , , , , , , , , , , , , ,		· -	7,77-7.7.1	*		
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	2,135.02	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	558.19	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	· -	0.00	\$	N/A	
	5e.	Insurance	5e.	\$-	41.39	\$	N/A	
	5f.	Domestic support obligations	5f.	\$-	0.00	\$	N/A	
	5g.	Union dues	5g.	\$-	0.00	\$	N/A	
	5h.	Other deductions. Specify: Accidental Death	5h.	· -		+ \$	N/A	
	011.	Dental	— "	·	14.69	\$	N/A	
		Critical Illness Insurance		\$-	6.33	\$	N/A	
		HSA		\$-	173.49	\$	N/A	
		LTD		\$-	34.99	\$	N/A	
		Member Opt		\$-		\$	N/A N/A	
		Short Term Disability		\$-	3.99	\$		
				· -	8.47	Ψ	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	2,992.83	\$	<u>N/A</u>	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	4,781.88	\$	N/A	
8.	List	all other income regularly received:						
	8a.	Net income from rental property and from operating a business,						
		profession, or farm						
		Attach a statement for each property and business showing gross						
		receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$-	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent		Ψ_	0.00	Ψ	N/A	
	oc.	regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce						
		settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$ -	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental		_				
		Nutrition Assistance Program) or housing subsidies.						
		Specify:	8f.	\$_	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$_	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.	+ \$ _	0.00	+ \$	N/A	
								7
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$ _	0.00	\$	N/A	<u>. </u>
			Г.					_
10.		culate monthly income. Add line 7 + line 9.	10.	·	4,781.88 + \$	N/A	= \$	4,781.88
	Aaa	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.					J L	
11.		te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your de		ata		۵		
		ade contributions from an unmamed partner, members or your nousehold, your de or friends or relatives.	epende	iis, yc	our roommates, an	u		
		not include any amounts already included in lines 2-10 or amounts that are not ava	ailable t	o pay	expenses listed in	Schedule J.		
	Spec			' '	•	11.	+\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain					\$	4,781.88
	vviil	o mat amount on meourninary or otherwies and statistical summary of Certain	ı LIANIIIII	us all	u incialeu <i>Dala,</i> II I	rapplies '-		,
							Combin	
13.	Do،	you expect an increase or decrease within the year after you file this form?	?				monthly	mcome
	.	No.	•					
	_	Yes Explain:						

Official Form 106l Schedule I: Your Income page 2

Fill in	this informa	ition to identify yo	ur case:			l		
Debto		David J. Fas					k if this is: An amended filing	
Debto							A supplement show	ring postpetition chapter 13
` '	se, if filing) d States Bankı	ruptcy Court for the:		RN DISTRICT OF PENNS NG DIVISION	YLVANIA,	_	expenses as of the MM / DD / YYYY	rollowing date:
			KEADII	NG DIVISION				
(If kno		0-14775						
Off	icial Fo	rm 106J						
Scl	hedule	J: Your E	Expen	ses				12/1
infori (if kn	mation. If m own). Answ	ore space is nee er every questio	ded, attac n.	If two married people are th another sheet to this fo				supplying correct ur name and case numbe
Part 1 1.	Is this a joir	ribe Your Houselnt case?	1010					
	■ No. Go to	o line 2. s Debtor 2 live in	ı a separa	te household?				
	□ N □ Y	-	t file Officia	al Form 106J-2, <i>Expenses</i>	for Separate Housel	noldof Debtor	2.	
2. I	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state dependents				Son		17	■ No □ Yes
					Son		19	■ No
							- 13	☐ Yes ☐ No
								☐ Yes
								□No
3. I	Do vour ext	enses include	_	NI-				☐ Yes
	expenses o	f people other th d your depender	an $_{\square}$	No Yes				
expe	nate your ex		ur bankru	y Expenses ptcy filing date unless yo is filed. If this is a suppl				
value		sistance and hav		overnment assistance if d it on Schedule I: Your I			Your exp	enses
(0		,						
		or home ownersh and any rent for the		ses for your residence. In ot.	clude first mortgage	4. \$		1,044.00
ı	If not includ	led in line 4:						
4	4a. Real e	estate taxes				4a. \$		0.00
4	4b. Prope	rty, homeowner's,	or renter's	insurance		4b. \$		0.00
		maintenance, re				4c. \$		200.00
		owner's association			ne equity leans	4d. \$ 5. \$		145.00
5 .	Auditional f	nortgage payme	ins for yo	ur residence , such as hon	ne equity loans	5. \$		0.00

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Debtor	1 Fassbender, David J.	Case num	ber (if known)	20-14775
6. U	tilities:			
6	a. Electricity, heat, natural gas	6a.	\$	200.00
6	o. Water, sewer, garbage collection	6b.	\$	103.00
60	c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	400.00
60	d. Other. Specify:	6d.	\$	0.00
F	ood and housekeeping supplies	 7.	\$	779.00
С	hildcare and children's education costs	8.	\$	150.00
С	othing, laundry, and dry cleaning	9.	\$	100.00
. P	ersonal care products and services	10.	\$	43.00
. M	edical and dental expenses	11.	\$	100.00
. Ti	ransportation. Include gas, maintenance, bus or train fare.			
	o not include car payments.	12.	\$	242.00
Ε	ntertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
С	haritable contributions and religious donations	14.	\$	0.00
In	surance.			
	o not include insurance deducted from your pay or included in lines 4 or 20.		_	
	Sa. Life insurance	15a.		40.00
1	5b. Health insurance	15b.	\$	0.00
15	Sc. Vehicle insurance	15c.	\$	130.00
15	5d. Other insurance. Specify:	15d.	\$	0.00
	axes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	pecify:	16.	\$	0.00
	stallment or lease payments: 'a. Car payments for Vehicle 1	17a.	¢	444.00
	• •	17a. 17b.		
	7b. Car payments for Vehicle 2		·	0.00
	7c. Other. Specify:	17c.	·	0.00
	d. Other. Specify:	17d.	\$	0.00
	our payments of alimony, maintenance, and support that you did not report as educted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	ther payments you make to support others who do not live with you.		\$	300.00
	pecify: College Age Students	19.		300.00
	ther real property expenses not included in lines 4 or 5 of this form or on Schedu		r Income.	
	Da. Mortgages on other property	20a.		0.00
	b. Real estate taxes	20b.		0.00
	c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	od. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	De. Homeowner's association or condominium dues	20a.	·	0.00
	ther: Specify:		+\$	0.00
U	uiei. Opecily.		-Ψ	0.00
С	alculate your monthly expenses			
	2a. Add lines 4 through 21.		\$	4,520.00
22	2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22	2c. Add line 22a and 22b. The result is your monthly expenses.		\$	4,520.00
	, , ,			,: 5:55
	alculate your monthly net income.	00-	¢.	4 = 24 22
	Ba. Copy line 12 (your combined monthly income) from Schedule I.	23a.		4,781.88
23	Bb. Copy your monthly expenses from line 22c above.	23b.	-\$	4,520.00
~	Cubtract your monthly avagage from your monthly in			
2.	8c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$	261.88
	The result is your monthly net income.	_00.		
Fo m	by you expect an increase or decrease in your expenses within the year after you or example, do you expect to finish paying for your car loan within the year or do you expect your publification to the terms of your mortgage? No.			ase or decrease because of a
- 1	Yes. Explain here:			